

Washington State Functional Family Therapy Project

In 1997, the Washington State Legislature passed the Community Juvenile Accountability Act (CJAA) to reduce juvenile crime by establishing “research-based” programs in the state’s juvenile courts. The CJAA funded the nation’s first statewide experiment concerning research-based programs for juvenile justice. FFT was one of four Evidence Based Programs (EBP’s) that was chosen and implemented across the State. The Washington State Institute for Public Policy (WSIPP) conducted a study of the program and found FFT to be effective when competently delivered (Outcome Evaluation of WA State’s Research-Based Programs for Juvenile Offenders; Jan 2004). FFT is currently offered in many of the Washington State Juvenile Courts, Juvenile Rehabilitation Administration and in some areas of Children’s Administration.

Functional Family Therapy (FFT)

Functional Family Therapy (FFT) is an empirically grounded, well documented and highly successful family intervention program for at risk and delinquent youth who are 11-18 years of age.

FFT has been applied to a wide range of youth and their families in various multi-ethnic and multicultural contexts. Target populations range from at-risk preadolescents to youth with very serious problems including: conduct disorder, violent externalizing behaviors and substance abuse.

While FFT targets youth who have come in contact with the juvenile justice or child welfare systems, younger siblings of referred youth often become part of the FFT intervention process as well. www.fftinc.com

FFT is a short term intervention that occurs over 8-12 sessions, lasting three to four months. Sessions often occur in the family home and at a time that is convenient to the family.

The FFT clinical model includes specific phases which organize the intervention in a coherent manner, thereby allowing practitioners to maintain focus in the context of considerable family and youth disruption. Each phase includes specific goals, assessment, specific techniques of intervention, and practitioner skill sets necessary for success.

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The Washington State FFT Quality Assurance Program is dedicated to implementing Functional Family Therapy with high model fidelity. Evidence suggests that EBP’s depend on high model fidelity for successful outcomes (WSIPP 2003). The Washington State FFT Quality Assurance and Improvement System incorporates ongoing monitoring and tracking of reliable measures of the FFT model implementation with an improvement process that includes ongoing, specific, and timely feedback.

When FFT is delivered competently, the program reduces felony recidivism by 38 percent. The cost benefit analyses find that FFT generates \$2.77 in savings (avoided crime costs) for each taxpayer dollar spent on the program regardless of therapist competence. ***For competent therapists, the savings are greater—\$10.69 in benefits for each taxpayer dollar spent. (WSIPP Jan. 2004)***

The FFT Model consists of 5 parts...

Pretreatment: This is the phase before the family begins FFT; it includes communication with the referral source, having telephone contact with the family, and setting up the first session.

Engagement: This phase is focused on listening, respecting and “matching” to the family’s needs.

Motivation: This phase helps family members gain hope and see their problems as something that affects everyone. The goal is to create an atmosphere where all family members are motivated to change.

Behavior Change. This phase focuses on teaching family members new behaviors and skills; this could include interpersonal communication, bargaining and negotiation, problem solving, and contracting.

Generalization. In this phase, the focus is on maintaining and generalizing the skills to new and different situations. This includes relapse prevention and identifying ongoing services or supports needed to help the family be independent.